

**Informational Bulletin 07-07:
114.3 CMR 22.00: Durable Medical Equipment,
Oxygen and Respiratory Therapy Equipment**

HCPCS Updates and Corrections: Effective October 1, 2007

Under authority of Regulation 114.3 CMR 22.01, the Division of Health Care Finance and Policy has implemented a number of changes in codes and rates for durable medical equipment, oxygen and respiratory therapy equipment services. As outlined in 22.01(5), Coding Updates and Corrections, the Division may publish such changes in the form of an Informational Bulletin that lists: (a) codes for which the code numbers changed, with the corresponding crosswalks; (b) codes for which the descriptions changed; (c) deleted codes for which there are no crosswalks; and (d) for new codes that require new pricing, the Division may list these codes and price them at a percentage of the prevailing Medicare fees as described in 114.3 CMR 22.03(15), when Medicare fees are available. When Medicare fees are not available, the Division may apply individual consideration in reimbursing for these new codes until appropriate rates can be developed. For payment on an individual consideration (I.C.) basis, refer to the methodology described under 114.3 CMR 22.02 General Definitions. The changes are effective as of October 1, 2007.

The following new codes have been added:

New Code	Rate	Description
A4461	2.63	Surgical dressing holder, non-reusable, each
A4463	10.65	Surgical dressing holder, reusable, each
A4559	0.08	Coupling gel or paste, for use with ultrasound device, per oz
A4600	AAC+20%	Sleeve for intermittent limb compression device, replacement only, each
A4601	AAC+20%	Lithium ion battery for non-prosthetic use, replacement
A9279	AAC+20%	Monitoring feature/device, stand-alone or integrated, any type, includes all accessories, components and electronics, not otherwise classified
E0676	AAC+30%	Intermittent limb compression device (includes all accessories), not otherwise specified
E0936	AAC+30%	Continuous passive motion exercise device for use other than knee
E2373NU	1,209.93	Power wheelchair accessory, hand or chin control interface, mini-proportional, compact, or short throw remote joystick or touchpad, proportional, including all related electronics and fixed mounting hardware (new equipment)
E2373RR	121.00	Power wheelchair accessory, hand or chin control interface, mini-proportional, compact, or short throw remote joystick or touchpad, proportional, including all related electronics and fixed mounting hardware (rental)

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New Code	Rate	Description
E2373UE	907.47	Power wheelchair accessory, hand or chin control interface, mini-proportional, compact, or short throw remote joystick or touchpad, proportional, including all related electronics and fixed mounting hardware (used durable medical equipment)
E2374NU	534.02	Power wheelchair accessory, hand or chin control interface, standard remote joystick (not including controller), proportional, including all related electronics and fixed mounting hardware, replacement only (new equipment)
E2374RR	53.40	Power wheelchair accessory, hand or chin control interface, standard remote joystick (not including controller), proportional, including all related electronics and fixed mounting hardware, replacement only (rental)
E2374UE	400.53	Power wheelchair accessory, hand or chin control interface, standard remote joystick (not including controller), proportional, including all related electronics and fixed mounting hardware, replacement only (used durable medical equipment)
E2375NU	856.56	Power wheelchair accessory, non-expandable controller, including all related electronics and mounting hardware, replacement only (new equipment)
E2375RR	85.65	Power wheelchair accessory, non-expandable controller, including all related electronics and mounting hardware, replacement only (rental)
E2375UE	642.40	Power wheelchair accessory, non-expandable controller, including all related electronics and mounting hardware, replacement only (used durable medical equipment)
E2376NU	1,342.27	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, replacement only (new equipment)
E2376RR	134.23	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, replacement only (rental)
E2376UE	1,006.72	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, replacement only (used durable medical equipment)
E2377NU	485.71	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, upgrade provided at initial issue (new equipment)
E2377RR	48.56	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, upgrade provided at initial issue (rental)
E2377UE	364.30	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, upgrade provided at initial issue (used durable medical equipment)
E2381NU	76.18	Power wheelchair accessory, pneumatic drive wheel tire, any size, replacement only, each (new equipment)
E2381RR	7.63	Power wheelchair accessory, pneumatic drive wheel tire, any size, replacement only, each (rental)
E2381UE	57.14	Power wheelchair accessory, pneumatic drive wheel tire, any size, replacement only, each (used durable medical equipment)

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New Code	Rate	Description
E2382NU	20.77	Power wheelchair accessory, tube for pneumatic drive wheel tire, any size, replacement only, each (new equipment)
E2382RR	2.07	Power wheelchair accessory, tube for pneumatic drive wheel tire, any size, replacement only, each (rental)
E2382UE	15.57	Power wheelchair accessory, tube for pneumatic drive wheel tire, any size, replacement only, each (used durable medical equipment)
E2383NU	151.88	Power wheelchair accessory, insert for pneumatic drive wheel tire (removable), any type, any size, replacement only, each (new equipment)
E2383RR	15.19	Power wheelchair accessory, insert for pneumatic drive wheel tire (removable), any type, any size, replacement only, each (rental)
E2383UE	113.91	Power wheelchair accessory, insert for pneumatic drive wheel tire (removable), any type, any size, replacement only, each (used durable medical equipment)
E2384NU	80.91	Power wheelchair accessory, pneumatic caster tire, any size, replacement only, each (new equipment)
E2384RR	8.11	Power wheelchair accessory, pneumatic caster tire, any size, replacement only, each (rental)
E2384UE	60.68	Power wheelchair accessory, pneumatic caster tire, any size, replacement only, each (used durable medical equipment)
E2385NU	49.50	Power wheelchair accessory, tube for pneumatic caster tire, any size, replacement only, each (new equipment)
E2385RR	4.96	Power wheelchair accessory, tube for pneumatic caster tire, any size, replacement only, each (rental)
E2385UE	37.11	Power wheelchair accessory, tube for pneumatic caster tire, any size, replacement only, each (used durable medical equipment)
E2386NU	150.51	Power wheelchair accessory, foam filled drive wheel tire, any size, replacement only, each (new equipment)
E2386RR	15.05	Power wheelchair accessory, foam filled drive wheel tire, any size, replacement only, each (rental)
E2386UE	112.87	Power wheelchair accessory, foam filled drive wheel tire, any size, replacement only, each (used durable medical equipment)
E2387NU	67.49	Power wheelchair accessory, foam filled caster tire, any size, replacement only, each (new equipment)
E2387RR	6.75	Power wheelchair accessory, foam filled caster tire, any size, replacement only, each (rental)
E2387UE	50.65	Power wheelchair accessory, foam filled caster tire, any size, replacement only, each (used durable medical equipment)
E2388NU	50.39	Power wheelchair accessory, foam drive wheel tire, any size, replacement only, each (new equipment)
E2388RR	5.04	Power wheelchair accessory, foam drive wheel tire, any size, replacement only, each (rental)
E2388UE	37.80	Power wheelchair accessory, foam drive wheel tire, any size, replacement only, each (used durable medical equipment)
E2389NU	27.36	Power wheelchair accessory, foam caster tire, any size, replacement only, each (new equipment)
E2389RR	2.74	Power wheelchair accessory, foam caster tire, any size, replacement only, each (rental)

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New Code	Rate	Description
E2389UE	20.51	Power wheelchair accessory, foam caster tire, any size, replacement only, each (used durable medical equipment)
E2390NU	42.79	Power wheelchair accessory, solid (rubber/plastic) drive wheel tire, any size, replacement only, each (new equipment)
E2390RR	4.28	Power wheelchair accessory, solid (rubber/plastic) drive wheel tire, any size, replacement only, each (rental)
E2390UE	32.07	Power wheelchair accessory, solid (rubber/plastic) drive wheel tire, any size, replacement only, each (used durable medical equipment)
E2391NU	20.50	Power wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each (new equipment)
E2391RR	2.05	Power wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each (rental)
E2391UE	15.38	Power wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each (used durable medical equipment)
E2392NU	53.88	Power wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each (new equipment)
E2392RR	5.40	Power wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each (rental)
E2392UE	40.41	Power wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each (used durable medical equipment)
E2393	AAC+35%	Power wheelchair accessory, valve for pneumatic tire tube, any type, replacement only, each
E2394NU	76.75	Power wheelchair accessory, drive wheel excludes tire, any size, replacement only, each (new equipment)
E2394RR	7.69	Power wheelchair accessory, drive wheel excludes tire, any size, replacement only, each (rental)
E2394UE	57.57	Power wheelchair accessory, drive wheel excludes tire, any size, replacement only, each (used durable medical equipment)
E2395NU	54.55	Power wheelchair accessory, caster wheel excludes tire, any size, replacement only, each (new equipment)
E2395RR	5.46	Power wheelchair accessory, caster wheel excludes tire, any size, replacement only, each (rental)
E2395UE	40.93	Power wheelchair accessory, caster wheel excludes tire, any size, replacement only, each (used durable medical equipment)
E2396NU	64.07	Power wheelchair accessory, caster fork, any size, replacement only, each (new equipment)
E2396RR	7.13	Power wheelchair accessory, caster fork, any size, replacement only, each (rental)
E2396UE	48.07	Power wheelchair accessory, caster fork, any size, replacement only, each (used durable medical equipment)
J0129	AAC	Injection, abatacept, 10 mg
J0348	AAC	Injection, anadulafungin, 1 mg
J0594	AAC	Injection, busulfan, 1 mg
J0894	AAC	Injection, decitabine, 1 mg
J1458	AAC	Injection, galsulfase, 1 mg

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New Code	Rate	Description
J1562	AAC	Injection, Immune Globulin, subcutaneous, 100 mg
J2248	AAC	Injection, micafungin sodium, 1 mg
J3243	AAC	Injection, tigecycline, 1 mg
J7607	AAC	Levalbuterol, inhalation solution, compounded product, administered through DME, concentrated form, 0.5 mg
J7609KO	AAC	Albuterol, inhalation solution, compounded product, administered through DME, unit dose, 1 mg (single drug unit dose formulation)
J7609KP	AAC	Albuterol, inhalation solution, compounded product, administered through DME, unit dose, 1 mg (first drug of a multiple unit dose formulation)
J7609KQ	AAC	Albuterol, inhalation solution, compounded product, administered through DME, unit dose, 1 mg (second or subsequent drug of a multiple unit dose formulation)
J7610	AAC	Albuterol, inhalation solution, compounded product, administered through DME, concentrated form 1 mg
J7615KO	AAC	Levalbuterol, inhalation solution, compounded product, administered through DME, unit dose, 0.5 mg (single drug unit dose formulation)
J7615KP	AAC	Levalbuterol, inhalation solution, compounded product, administered through DME, unit dose, 0.5 mg (first drug of a multiple unit dose formulation)
J7615KQ	AAC	Levalbuterol, inhalation solution, compounded product, administered through DME, unit dose, 0.5 mg (second or subsequent drug of a multiple unit dose formulation)
J7634	AAC	Budesonide, inhalation solution, compounded product, administered through DME, concentrated form, per 0.25 Milligram
J7640KO	AAC	Formoterol, inhalation solution, compounded product, administered through DME, unit dose form, 12 micrograms (single drug unit dose formulation)
J7640KP	AAC	Formoterol, inhalation solution, compounded product, administered through DME, unit dose form, 12 micrograms (first drug of a multiple unit dose formulation)
J7640KQ	AAC	Formoterol, inhalation solution, compounded product, administered through DME, unit dose form, 12 micrograms (second or subsequent drug of a multiple unit dose formulation)
J7645KO	AAC	Ipratropium bromide, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7645KP	AAC	Ipratropium bromide, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation) (first drug of a multiple unit dose formulation)
J7645KQ	AAC	Ipratropium bromide, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation) (second or subsequent drug of a multiple unit dose formulation)
J7647	AAC	Isoetharine HCl, inhalation solution, compounded product, administered through DME, concentrated form, per milligram

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New Code	Rate	Description
J7650KO	AAC	Isoetharine HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7650KP	AAC	Isoetharine HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7650KQ	AAC	Isoetharine HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7657	AAC	Isoproterenol HCl, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7660KO	AAC	Isoproterenol HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7660KP	AAC	Isoproterenol HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7660KQ	AAC	Isoproterenol HCl, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7667	AAC	Metaproterenol sulfate, inhalation solution, compounded product, concentrated form, per 10 milligrams
J7670KO	AAC	Metaproterenol sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per 10 milligrams (single drug unit dose formulation)
J7670KP	AAC	Metaproterenol sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per 10 (first drug of a multiple unit dose formulation)
J7670KQ	AAC	Metaproterenol sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per 10 (second or subsequent drug of a multiple unit dose formulation)
J7685	AAC	Tobramycin, inhalation solution, compounded product, administered through DME, unit dose form, per 300 milligrams
J8650	AAC	Nabilone, oral, 1 mg
J9261	AAC	Injection, nelarabine, 50 mg
K0733NU	30.21	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g. gel cell, absorbed glassmat) (new equipment)
K0733RR	3.04	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g. gel cell, absorbed glassmat) (rental)
K0733UE	22.67	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g. gel cell, absorbed glassmat) (used durable medical equipment)
K0734NU	331.47	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth (new equipment)
K0734RR	33.15	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth (rental)
K0734UE	248.60	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth (used durable medical equipment)

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New Code	Rate	Description
K0735NU	421.78	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (new equipment)
K0735RR	42.19	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (rental)
K0735UE	316.33	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (used durable medical equipment)
K0736NU	334.19	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth (new equipment)
K0736RR	33.42	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth (rental)
K0736UE	250.66	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth (used durable medical equipment)
K0737NU	423.06	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (new equipment)
K0737RR	42.30	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (rental)
K0737UE	317.29	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth (used durable medical equipment)
K0738 RR	51.63	Portable gaseous oxygen system, rental; home compressor used to fill portable oxygen cylinders; includes portable containers, regulator, flowmeter, humidifier, cannula or mask, and tubing.
K0800NU	1,292.77	Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds (new equipment)
K0800RR	129.28	Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds (rental)
K0800UE	969.58	Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0801NU	2,084.22	Power operated vehicle, group 1 heavy duty, patient weight capacity, 301 to 450 pounds (new equipment)
K0801RR	208.40	Power operated vehicle, group 1 heavy duty, patient weight capacity, 301 to 450 pounds (rental)
K0801UE	1,563.15	Power operated vehicle, group 1 heavy duty, patient weight capacity, 301 to 450 pounds (used durable medical equipment)
K0802NU	2,358.66	Power operated vehicle, group 1 very heavy duty, patient weight capacity 451 to 600 pounds (new equipment)
K0802RR	235.86	Power operated vehicle, group 1 very heavy duty, patient weight capacity 451 to 600 pounds (rental)
K0802UE	1,769.01	Power operated vehicle, group 1 very heavy duty, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0806NU	1,563.91	Power operated vehicle, group 2 standard, patient weight capacity up to and including 300 pounds (new equipment)
K0806RR	156.39	Power operated vehicle, group 2 standard, patient weight capacity up to and including 300 pounds (rental)
K0806UE	1,172.93	Power operated vehicle, group 2 standard, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0807NU	2,373.05	Power operated vehicle, group 2 heavy duty, patient weight capacity 301 to 450 pounds (new equipment)

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New Code	Rate	Description
K0807RR	237.30	Power operated vehicle, group 2 heavy duty, patient weight capacity 301 to 450 pounds (rental)
K0807UE	1,779.80	Power operated vehicle, group 2 heavy duty, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0808NU	3,671.60	Power operated vehicle, group 2 very heavy duty, patient weight capacity 451 to 600 pounds (new equipment)
K0808RR	367.15	Power operated vehicle, group 2 very heavy duty, patient weight capacity 451 to 600 pounds (rental)
K0808UE	2,753.69	Power operated vehicle, group 2 very heavy duty, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0812NU	AAC+35%	Power operated vehicle, not otherwise classified (new equipment)
K0812RR	I.C.	Power operated vehicle, not otherwise classified (rental)
K0812UE	I.C.	Power operated vehicle, not otherwise classified (used durable medical equipment)
K0813NU	2,412.40	Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds (new equipment)
K0813RR	241.24	Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds (rental)
K0813UE	1,809.30	Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0814NU	3,087.80	Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0814RR	308.78	Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0814UE	2,315.85	Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0815NU	3,516.30	Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds (new equipment)
K0815RR	351.63	Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds (rental)
K0815UE	2,637.23	Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0816NU	3,367.40	Power wheelchair, group 1 standard, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0816RR	336.74	Power wheelchair, group 1 standard, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0816UE	2,525.55	Power wheelchair, group 1 standard, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0820NU	2,576.60	Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)

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New Code	Rate	Description
K0820RR	257.66	Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0820UE	1,932.45	Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0821NU	3,307.70	Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0821RR	330.77	Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0821UE	2,480.78	Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0822NU	3,997.50	Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0822RR	399.75	Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0822UE	2,998.13	Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0823NU	4,023.70	Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0823RR	402.37	Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0823UE	3,017.78	Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0824NU	4,842.70	Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0824RR	484.27	Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0824UE	3,632.03	Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0825NU	4,433.20	Power wheelchair, group 2 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (new equipment)
K0825RR	443.32	Power wheelchair, group 2 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (rental)
K0825UE	3,324.90	Power wheelchair, group 2 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0826NU	6,269.30	Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)
K0826RR	626.93	Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0826UE	4,701.98	Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)

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New Code	Rate	Description
K0827NU	5,330.90	Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds (new equipment)
K0827RR	533.09	Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds (rental)
K0827UE	3,998.18	Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0828NU	6,908.20	Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (new equipment)
K0828RR	690.82	Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (rental)
K0828UE	5,181.15	Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (used durable medical equipment)
K0829NU	6,343.70	Power wheelchair, group 2 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (new equipment)
K0829RR	634.37	Power wheelchair, group 2 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (rental)
K0829UE	4,757.78	Power wheelchair, group 2 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (used durable medical equipment)
K0830NU	3,914.10	Power wheelchair, group 2 standard, seat elevator, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0830RR	391.41	Power wheelchair, group 2 standard, seat elevator, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0830UE	2,935.58	Power wheelchair, group 2 standard, seat elevator, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0831NU	3,914.10	Power wheelchair, group 2 standard, seat elevator, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0831RR	391.41	Power wheelchair, group 2 standard, seat elevator, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0831UE	2,935.58	Power wheelchair, group 2 standard, seat elevator, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0835NU	4,057.40	Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0835RR	405.74	Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0835UE	3,043.05	Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)

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K0836NU	4,207.50	Power wheelchair, group 2 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0836RR	420.75	Power wheelchair, group 2 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0836UE	3,155.63	Power wheelchair, group 2 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0837NU	4,842.70	Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0837RR	484.27	Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0837UE	3,632.03	Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0838NU	4,332.30	Power wheelchair, group 2 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (new equipment)
K0838RR	433.23	Power wheelchair, group 2 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (rental)
K0838UE	3,249.23	Power wheelchair, group 2 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0839NU	6,269.30	Power wheelchair, group 2 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)
K0839RR	626.93	Power wheelchair, group 2 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0839UE	4,701.98	Power wheelchair, group 2 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0840NU	9,498.30	Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more (new equipment)
K0840RR	949.83	Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more (rental)
K0840UE	7,123.73	Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more (used durable medical equipment)
K0841NU	4,318.60	Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)

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New Code	Rate	Description
K0841RR	431.86	Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0841UE	3,238.95	Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0842NU	4,318.60	Power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0842RR	431.86	Power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0842UE	3,238.95	Power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0843NU	5,199.60	Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0843RR	519.96	Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0843UE	3,899.70	Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0848NU	5,284.40	Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0848RR	528.44	Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0848UE	3,963.30	Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0849NU	5,080.70	Power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0849RR	508.07	Power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds
K0849UE	3,810.53	Power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0850NU	6,129.80	Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0850RR	612.98	Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0850UE	4,597.35	Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0851NU	5,893.70	Power wheelchair, group 3 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (new equipment)
K0851RR	589.37	Power wheelchair, group 3 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (rental)

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New Code	Rate	Description
K0851UE	4,420.28	Power wheelchair, group 3 heavy duty, captains chair, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0852NU	7,082.60	Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)
K0852RR	708.26	Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0852UE	5,311.95	Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0853NU	7,275.60	Power wheelchair, group 3 very heavy duty, captains chair, patient weight capacity, 451 to 600 pounds (new equipment)
K0853RR	727.56	Power wheelchair, group 3 very heavy duty, captains chair, patient weight capacity, 451 to 600 pounds (rental)
K0853UE	5,456.70	Power wheelchair, group 3 very heavy duty, captains chair, patient weight capacity, 451 to 600 pounds (used durable medical equipment)
K0854NU	9,638.60	Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (new equipment)
K0854RR	963.86	Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (rental)
K0854UE	7,228.95	Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more (used durable medical equipment)
K0855NU	9,105.10	Power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (new equipment)
K0855RR	910.51	Power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (rental)
K0855UE	6,828.83	Power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more (used durable medical equipment)
K0856NU	5,672.30	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0856RR	567.23	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0856UE	4,254.23	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0857NU	5,786.00	Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0857RR	578.60	Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0857UE	4,339.50	Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)

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New Code	Rate	Description
K0858NU	7,037.60	Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0858RR	703.76	Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0858UE	5,278.20	Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0859NU	6,711.70	Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (new equipment)
K0859RR	671.17	Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (rental)
K0859UE	5,033.78	Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0860NU	10,054.10	Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)
K0860RR	1,005.41	Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0860UE	7,540.58	Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0861NU	5,681.40	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0861RR	568.14	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0861UE	4,261.05	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0861NU KF	6,141.90	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment) (FDA class III device)
K0861RR KF	614.19	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental) (FDA class III device)
K0861UE KF	4,606.43	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment) (FDA class III device)
K0862NU	7,037.60	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)

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New Code	Rate	Description
K0862RR	703.76	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0862UE	5,278.20	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0863NU	10,054.10	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)
K0863RR	1,005.41	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0863UE	7,540.58	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0864NU	11,964.50	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more (new equipment)
K0864RR	1,196.45	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more (rental)
K0864UE	8,973.38	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more (used durable medical equipment)
K0868NU	AAC+35%	Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0868RR	I.C.	Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment) (rental)
K0868UE	I.C.	Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment) (used durable medical equipment)
K0869NU	AAC+35%	Power wheelchair, group 4 standard, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0869RR	I.C.	Power wheelchair, group 4 standard, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0869UE	I.C.	Power wheelchair, group 4 standard, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0870NU	AAC+35%	Power wheelchair, group 4 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0870RR	I.C.	Power wheelchair, group 4 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0870UE	I.C.	Power wheelchair, group 4 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0871NU	AAC+35%	Power wheelchair, group 4 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (new equipment)

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New Code	Rate	Description
K0871RR	I.C.	Power wheelchair, group 4 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (rental)
K0871UE	I.C.	Power wheelchair, group 4 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds (used durable medical equipment)
K0877NU	AAC+35%	Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0877RR	I.C.	Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0877UE	I.C.	Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0878NU	AAC+35%	Power wheelchair, group 4 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (new equipment)
K0878RR	I.C.	Power wheelchair, group 4 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (rental)
K0878UE	I.C.	Power wheelchair, group 4 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds (used durable medical equipment)
K0879NU	AAC+35%	Power wheelchair, group 4 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0879RR	I.C.	Power wheelchair, group 4 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0879UE	I.C.	Power wheelchair, group 4 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0880NU	AAC+35%	Power wheelchair, group 4 very heavy duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds (new equipment)
K0880RR	I.C.	Power wheelchair, group 4 very heavy duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds (rental)
K0880UE	I.C.	Power wheelchair, group 4 very heavy duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds (used durable medical equipment)
K0884NU	AAC+35%	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (new equipment)
K0884RR	I.C.	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (rental)
K0884UE	I.C.	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds (used durable medical equipment)

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New Code	Rate	Description
K0885NU	AAC+35%	Power wheelchair, group 4 standard, multiple power option, captains chair, weight capacity up to and including 300 pounds (new equipment)
K0885RR	I.C.	Power wheelchair, group 4 standard, multiple power option, captains chair, weight capacity up to and including 300 pounds (rental)
K0885UE	I.C.	Power wheelchair, group 4 standard, multiple power option, captains chair, weight capacity up to and including 300 pounds (used durable medical equipment)
K0886NU	AAC+35%	Power wheelchair, group 4 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (new equipment)
K0886RR	I.C.	Power wheelchair, group 4 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (rental)
K0886UE	I.C.	Power wheelchair, group 4 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds (used durable medical equipment)
K0890NU	AAC+35%	Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (new equipment)
K0890RR	I.C.	Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (rental)
K0890UE	I.C.	Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (used durable medical equipment)
K0891NU	AAC+35%	Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (new equipment)
K0891RR	I.C.	Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (rental)
K0891UE	I.C.	Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds (used durable medical equipment)
K0898NU	AAC+35%	Power wheelchair, not otherwise classified (new equipment)
K0898RR	I.C.	Power wheelchair, not otherwise classified (rental)
K0898UE	I.C.	Power wheelchair, not otherwise classified (used durable medical equipment)
K0899NU	AAC+35%	Power mobility device, not coded by SADMERC or does not meet criteria (new equipment)
K0899RR	I.C.	Power mobility device, not coded by SADMERC or does not meet criteria (rental)
K0899UE	I.C.	Power mobility device, not coded by SADMERC or does not meet criteria (used durable medical equipment)
Q4080	27.39	Iloprost, inhalation solution, administered through DME, up to 20 micrograms
Q4081	AAC	Injection, epoetin alfa, 100 units (for ESRD on dialysis)

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The descriptors of the following codes have been revised:

Code	Rate	Revised Description
A4216	0.45	Sterile water, saline and/or dextrose, diluent/flush, 10 ml
A4306	AAC+20%	Disposable drug delivery system, flow rate of less than 50 ml per hour
A4326	10.37	Male external catheter with integral collection chamber, any type, each
A4394	2.58	Ostomy deodorant, with or without lubricant, for use in ostomy pouch, per fluid ounce
A4558	3.70	Conductive gel or paste, for use with electrical device (e.g., TENS, NMES), per oz
A5105	34.65	Urinary suspensory, with or without leg bag, with or without tube, each
E0163NU	81.80	Commode chair, mobile or stationary, with fixed arms (new equipment)
E0163RR	16.62	Commode chair, mobile or stationary, with fixed arms (rental)
E0163UE	61.34	Commode chair, mobile or stationary, with fixed arms (used durable medical equipment)
E0163UD	AAC+30%	Commode chair, mobile or stationary, with fixed arms (bariatric equipment)
E0165KH, KI	12.63	Commode chair, mobile or stationary, with detachable arms (capped rental)
E0165KJ	9.47	Commode chair, mobile or stationary, with detachable arms (capped rental)
E0165NU	132.64	Commode chair, mobile or stationary, with detachable arms (new equipment purchase)
E0165UE	99.48	Commode chair, mobile or stationary, with detachable arms (used durable medical equipment purchase)
E0165UD	AAC+30%	Commode chair, mobile or stationary, with detachable arms (bariatric equipment)
E0167NU	9.60	Pail or pan for use with commode chair, replacement only (new equipment)
E0167RR	0.86	Pail or pan for use with commode chair, replacement only (rental)
E0167UE	7.23	Pail or pan for use with commode chair, replacement only (used durable medical equipment)
E0167UD	AAC+30%	Pail or pan for use with commode chair, replacement only (bariatric equipment)
E0181KH, KI	19.26	Powered pressure reducing mattress overlay/pad, alternating, with pump, includes heavy duty (capped rental)
E0181KJ	14.45	Powered pressure reducing mattress overlay/pad, alternating, with pump, includes heavy duty (capped rental)
E0181NU	202.27	Powered pressure reducing mattress overlay/pad, alternating, with pump, includes heavy duty (new equipment purchase)
E0181UE	151.70	Powered pressure reducing mattress overlay/pad, alternating, with pump, includes heavy duty (used durable medical equipment purchase)

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Code	Rate	Revised Description
E0182KH, KI	17.80	Pump for alternating pressure pad, for replacement only (capped rental)
E0182KJ	13.35	Pump for alternating pressure pad, for replacement only (capped rental)
E0182NU	186.90	Pump for alternating pressure pad, for replacement only (new equipment purchase)
E0182UE	140.18	Pump for alternating pressure pad, for replacement only (used durable medical equipment purchase)
E0190NU	AAC+30%	Positioning cushion/pillow wedge, any shape or size, includes all components and accessories (new equipment)
E0190RR	I.C.	Positioning cushion/pillow wedge, any shape or size, includes all components and accessories (rental)
E0190UE	I.C.	Positioning cushion/pillow wedge, any shape or size, includes all components and accessories (used durable medical equipment)
E0720NU	294.06	Transcutaneous electrical nerve stimulation (TENS) device, two lead, localized stimulation (new equipment)
E0730NU	296.45	Transcutaneous electrical nerve stimulation (TENS) device, four or more leads, for multiple nerve stimulation (new equipment)
E0967NU	65.69	Manual wheelchair accessory, hand rim with projections, any type, each (new equipment)
E0967RR	6.57	Manual wheelchair accessory, hand rim with projections, any type, each (rental)
E0967UE	49.25	Manual wheelchair accessory, hand rim with projections, any type, each (used durable medical equipment)
E2209NU	107.16	Accessory, arm trough, with or without hand support, each (new equipment)
E2209RR	10.74	Accessory, arm trough, with or without hand support, each (rental)
E2209UE	80.38	Accessory, arm trough, with or without hand support, each (used durable medical equipment purchase)
J7611	0.07	Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, 1 mg
J7612	AAC	Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, 0.5 mg
J7613KO	0.07	Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 1 mg (single drug unit dose formulation)
J7613KP	0.07	Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 1 mg (first drug of a multiple unit dose formulation)
J7613KQ	0.07	Albuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 1 mg (second or subsequent drug of a multiple unit dose formulation)

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Code	Rate	Revised Description
J7614KO	1.20	Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 0.5 mg (single drug unit dose formulation)
J7614KP	1.20	Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 0.5 mg (first drug of a multiple unit dose formulation)
J7614KQ	AAC	Levalbuterol, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, 0.5 mg (second or subsequent drug of a multiple unit dose formulation)
J7620	0.86	Albuterol, up to 2.5 mg and Ipratropium bromide, up to 0.5 mg, FDA-approved final product, non-compounded, administered through DME
J7622KO	AAC	Beclomethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7622KP	AAC	Beclomethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7622KQ	AAC	Beclomethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7624KO	AAC	Betamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7624KP	AAC	Betamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7624KQ	AAC	Betamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7626KO	3.64	Budesonide inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, up to 0.5 mg (single drug unit dose formulation)
J7626KP	3.64	Budesonide inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, up to 0.5 mg (first drug of a multiple unit dose formulation)
J7626KQ	3.58	Budesonide inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, up to 0.5 mg (second or subsequent drug of a multiple unit dose formulation)
J7627KO	AAC	Budesonide, inhalation solution, compounded product, administered through DME, unit dose form, up to 0.5 mg (single drug unit dose formulation)

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Code	Rate	Revised Description
J7627KP	AAC	Budesonide, inhalation solution, compounded product, administered through DME, unit dose form, up to 0.5 mg (first drug of a multiple unit dose formulation)
J7627KQ	AAC	Budesonide, inhalation solution, compounded product, administered through DME, unit dose form, up to 0.5 mg (second or subsequent drug of a multiple unit dose formulation)
J7628	AAC	Bitolterol mesylate, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7629KO	AAC	Bitolterol mesylate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7629KP	AAC	Bitolterol mesylate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7629KQ	AAC	Bitolterol mesylate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7633	AAC	Budesonide, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, per 0.25 mg
J7635	0.18	Atropine, inhalation solution compounded product, administered through DME, concentrated form, per milligram
J7636KO	0.27	Atropine, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7636KP	0.27	Atropine, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7636KQ	0.21	Atropine, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7637	0.07	Dexamethasone, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7638KO	0.10	Dexamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7638KP	0.10	Dexamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7638KQ	0.07	Dexamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)

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Code	Rate	Revised Description
J7641KO	AAC	Flunisolide, inhalation solution, compounded product, administered through DME, unit dose, per milligram (single drug unit dose formulation)
J7641KP	AAC	Flunisolide, inhalation solution, compounded product, administered through DME, unit dose, per milligram (first drug of a multiple unit dose formulation)
J7641KQ	AAC	Flunisolide, inhalation solution, compounded product, administered through DME, unit dose, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7642	1.22	Glycopyrrolate, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7643KO	1.36	Glycopyrrolate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7643KP	1.36	Glycopyrrolate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7643KQ	1.22	Glycopyrrolate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7644KO	0.17	Ipratropium bromide, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7644KP	0.17	Ipratropium bromide, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7644KQ	0.05	Ipratropium bromide, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7648	AAC	Isoetharine HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, per milligram
J7649KO	AAC	Isoetharine HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7649KP	AAC	Isoetharine HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7649KQ	AAC	Isoetharine HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)

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Code	Rate	Revised Description
J7658	AAC	Isoproterenol HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, per milligram
J7659KO	AAC	Isoproterenol HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7659KP	AAC	Isoproterenol HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7659KQ	AAC	Isoproterenol HCl, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7668	AAC	Metaproterenol sulfate, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, per 10 milligrams
J7669KO	0.18	Metaproterenol sulfate, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per 10 milligrams (single drug unit dose formulation)
J7669KP	0.18	Metaproterenol sulfate, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per 10 milligrams (first drug of a multiple unit dose formulation)
J7669KQ	0.12	Metaproterenol sulfate, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose form, per 10 milligrams (second or subsequent drug of a multiple unit dose formulation)
J7680	AAC	Terbutaline sulfate, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7681KO	AAC	Terbutaline sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7681KP	AAC	Terbutaline sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7681KQ	43.20	Terbutaline sulfate, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)
J7682KO	43.20	Tobramycin, inhalation solution, FDA-approved final product, non-compounded, unit dose form, administered through DME, per 300 milligrams (single drug unit dose formulation)

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Code	Rate	Revised Description
J7682KP	AAC	Tobramycin, inhalation solution, FDA-approved final product, non-compounded, unit dose form, administered through DME, per 300 milligrams (first drug of a multiple unit dose formulation)
J7682KQ	AAC	Tobramycin, inhalation solution, FDA-approved final product, non-compounded, unit dose form, administered through DME, per 300 milligrams (second or subsequent drug of a multiple unit dose formulation)
J7683	AAC	Triamcinolone, inhalation solution, compounded product, administered through DME, concentrated form, per milligram
J7684KO	AAC	Triamcinolone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (single drug unit dose formulation)
J7684KP	AAC	Triamcinolone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (first drug of a multiple unit dose formulation)
J7684KQ	AAC	Triamcinolone, inhalation solution, compounded product, administered through DME, unit dose form, per milligram (second or subsequent drug of a multiple unit dose formulation)

The following codes have been deleted and replaced by new codes, the fees for which are noted above, unless otherwise indicated:

Old Code	Crosswalked Code	Description
A4348	A4326	Male external catheter with integral collection compartment, extended wear, each (e.g., 2 per month)
A4359	A5105	Urinary suspensory without leg bag, each
A4462	A4461, A4463	Abdominal dressing holder, each
E0164	E0163	Commode chair, mobile, with fixed arms
E0166	E0165	Commode chair, mobile, with detachable arms
E0180	E0181, E0182	Pressure pad, alternating with pump
E0701	A8000, A8001	Helmet with face guard and soft interface material, prefabricated
E2320	E2373, E2374	Power wheelchair accessory, hand or chin control interface, remote joystick or touchpad, proportional, including all related electronics, and fixed mounting hardware
K0090	E2381, E2386, E2388, E2390	Rear wheel tire for power wheelchair, any size, each
K0091	E2382	Rear wheel tire tube other than zero pressure for power wheelchair, any size, each
K0093	E2383	Rear wheel zero pressure tire tube (flat free insert) for power wheelchair, any size, each
K0094	E2381, E2384, E2386, E2387, E2388, E2389, E2390, E2391, E2392	Wheel tire for power base, any size, each

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Old Code	Crosswalked Code	Description
K0095	E2382	Wheel tire tube other than zero pressure for each base, any size, each
K0097	E2382, E2385	Wheel zero pressure tire tube (flat free insert) for power base, any size, each
K0098	K0108 ¹	Drive belt for power wheelchair
K0099	E2384, E2387, E2389, E2391, E2392	Front caster for power wheelchair, each

The following codes have been deleted without replacement:

K0010	Standard - weight frame motorized/power wheelchair
K0011	Standard - weight frame motorized/power wheelchair with programmable control parameters for speed adjustment, tremor dampening, acceleration control and braking.
K0012	Lightweight portable motorized/power wheelchair
K0014	Other motorized/power wheelchair base
K0092	Rear wheel assembly for power wheelchair, complete, each
K0096	Rear wheel assembly for power wheelchair, complete, each
E1230	Power operated vehicle(three or four wheel non highway), specify brand name and model number

The following code has been corrected:

Code	Rate	Description
A7520NU	47.48	Tracheostomy/laryngectomy tube, non-cuffed, polyvinylchloride (PVC), silicone or equal, each (new equipment)
A7521NU	47.05	Tracheostomy/laryngectomy tube, cuffed, polyvinylchloride (PVC), silicone or equal, each (new equipment)
A7522NU	45.16	Tracheostomy/laryngectomy tube, stainless steel [sterilizable and reusable], each (new equipment)
E1841UE	2,853.90	Multi-directional static progressive stretch shoulder device, with range of motion adjustability, includes cuffs (used durable medical equipment purchase)
E2620UE	431.08	Positioning wheelchair back cushion, planar back with lateral supports, width less than 22 inches, any height, including any type mounting hardware (used durable medical equipment)

¹ Wheelchair component or accessory, not otherwise specified, priced at individual consideration at AAC+35%.